

2016 Monthly Insurance Premiums for Active Subscribers

EMPLOYER				
	Health	Dental	Life	LTD
Subscriber Only	360.10	11.72	.28	3.22
Subscriber/Spouse	713.26	11.72	.28	3.22
Subscriber/Child	552.68	11.72	.28	3.22
Full Family	893.04	11.72	.28	3.22

HEALTH EMPLOYEE			
	Savings	Standard	Tricare
Subscriber Only	9.70	97.68	62.50
Subscriber/Spouse	77.40	253.36	121.50
Subscriber/Child	20.48	143.86	121.50
Full Family	113.00	306.56	162.50

TOBACCO SURCHARGE	
Single Coverage	40.00
Non-Single Coverage	60.00

DENTAL EMPLOYEE		
	Basic	Plus
Subscriber Only	0.00	TBD
Subscriber/Spouse	7.64	TBD
Subscriber/Child	13.72	TBD
Full Family	21.34	TBD

VISION	
Subscriber Only	7.00
Subscriber/Spouse	14.00
Subscriber/Child	14.98
Full Family	21.98

DEPENDENT LIFE	
15,000	1.10

SUPPLEMENTAL LTD		
AGE	90 DAY	180 DAY
< 31	0.00056	0.00045
31 – 40	0.00078	0.00060
41 – 50	0.00154	0.00117
51 – 60	0.00311	0.00239
61 – 65	0.00374	0.00287
> 65	0.00457	0.00351

STEPS TO CALCULATE SLTD MONTHLY PREMIUM

1. Always select floating decimal (F) on your calculator.
2. Divide gross annual salary by 12 to determine monthly salary.
3. Multiply monthly salary by rate factor from table.
4. Drop digits to right of 2 decimal places; do not round.
5. If number is even, this is the monthly premium.
6. If number is odd, add .01, this is the monthly premium.